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<input type="checkbox"/> PCT/IPEA/409 or PCT/ISA/237 was NOT AVAILABLE at the time of paralegal review	
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RECEIPTS FROM THE APPLICANT (other than checked above):

<input checked="" type="checkbox"/> Basic National Fee (or authorization to charge)	<input type="checkbox"/> Preliminary Amendment(s) Filed on: _____
<input type="checkbox"/> Description <u>19</u> <input type="checkbox"/> Claims <u>2</u> <input type="checkbox"/> Abstract	<input type="checkbox"/> 1. <input type="checkbox"/> same as 371 request date 2. _____ 3. _____
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<input type="checkbox"/> Translation of Article 19 Amendments	<input type="checkbox"/> 1. <input type="checkbox"/> same as 371 request date 2. _____ 3. _____
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<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> Substitute Specification Filed on: _____
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<input type="checkbox"/> Change of Address	<input type="checkbox"/> Verified Small Status Statement

<input type="checkbox"/> Oath/ Declaration (executed)	<input type="checkbox"/> Oath/ Declaration <input type="checkbox"/> unsigned <input type="checkbox"/> no citizenship <input type="checkbox"/> other
<input type="checkbox"/> DNA Diskette	<input type="checkbox"/> Sequence Listing
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